

# **AGENDA**

## **CABINET FOR HEALTH AND FAMILY SERVICES SECRETARY'S ADVISORY COMMITTEE ON TRANSPARENCY**

**February 2, 2009**

- I. Preview new IQI website.
- II. Response to previous suggestions.
- III. Update from last DAS meeting.
- IV. Non-compliance update.
- V. Status of new ASC required to report.
- VI. New recommendations from committee.

**SECRETARY'S ADVISORY COMMITTEE ON HEALTHCARE  
TRANSPARENCY MEETING  
December 8, 2008  
10:00 a.m.**

**PRESENT:**

Carrie Banahan  
Office of Health Policy

D. Kurt Adams  
Kentucky Chiropractic  
Society

Sarah Chasteen  
Kentucky Medical  
Association

Victor Cooper, DC  
Cooper Chiropractic Center

Bill Doll  
Jackson, Kelly PLLC

Betsy Johnson  
Department for Medicaid  
Services

Vernita Julian (on behalf of  
Dr. John Lewis)  
Health Care Excel

Bill Nold  
Department of Insurance

Tricia Okeson (on behalf of  
Dr. William Hacker)  
Department for Public  
Health

Melodie Shrader  
Kentucky Association of Health  
Plans

Chuck Warnick  
Kentucky Hospital  
Association

Marty White  
Kentucky Medical  
Association

**ABSENT:**

Steve Nunn  
Department for Mental Health,  
Developmental Disabilities, and  
Addiction Services

Ben Yandell  
Norton Health Care

**STAFF:** Cabinet for Health and Family Services, Office of Health Policy  
Sheena Lewis Allison Martinez Beth Morris  
Chandra Venettozzi

**CALL TO ORDER**

Secretary Janie Miller called the meeting to order in the Bluegrass Room located in the CHR building.

**WELCOME**

For the benefit of new members, Secretary Miller provided background information on the three different legislative actions that brought the Committee to existence. It was first introduced in HB 278 in the 2005 General Assembly session, which created the Cabinet Advisory Committee to look at the concept of transparency. In the 2006 Legislative session, HB 622 was introduced to implement health care transparency but failed to pass in the House; In response, HB 622 through a conference committee agreement, was incorporated into HB 380 as one of several acts that ultimately became law. In the 2008 Legislative session the Transparency language was codified through HB 44.

The charge of the Committee is to advise the Cabinet on the collection, analysis, and distribution of consumer-oriented information related to health care systems, cost of treatment and procedures, and outcomes of quality indicators. The Cabinet has the job of collection, analysis, and dissemination. The Cabinet provides health care data and findings that will educate consumers and providers with the purpose of improving patient morbidity and mortality outcomes. Prior recommendations developed by the Committee have resulted in the development of a website. Secretary Miller stated that it is likely that any federal initiative will include consumer-driven initiatives.

### **OFFICE OF HEALTH POLICY UPDATE**

Currently, the Cabinet is receiving data from Ambulatory Surgical Centers (ASC) which are hospital-based; however, we will begin collecting data from an initial group of ASCs at the beginning of 2009 with the goal of adding the others throughout the year.

In the past, non-hospital based ambulatory facilities have been unable to report due to conflicting reporting formats. The law governing data submission has now become more flexible by expanding from a UB 92 format only to requiring a “standard billing form” which will allow the different types of facilities to submit according to their existing billing forms. Questionnaires were sent to 298 ambulatory facilities which include non-hospital based ASCs, free standing ambulatory care clinics, mobile health service providers, and specialized medical technology service providers asking if they performed certain procedures. 230 responses have been received.

The Cabinet began collecting Emergency Department data in January of this year.

### **CURRENT STATE OF TRANSPARENCY INITIATIVE**

Carrie Banahan provided an overview of the Transparency website:  
<http://chfs.ky.gov/ohp/healthdata> .

On the Health Information Center site it is possible to access Inpatient Quality Indicators, Prevention Quality Indicators, Hospital Charge Data, and Hospital Comparison Data which is linked to the CMS website. There are currently plans to make the website more interactive and user-friendly. We hope to change the background database from Business Objects to a SQL Server, that allows for better usability.

The data used to prepare the Inpatient Quality Indicator (IQI) reports are based on inpatient discharge claims received on an annual basis. The data is processed through a software package from the Agency for Healthcare Research and Quality (AHRQ) and generates the results found in the reports used on the website.

The Prevention Quality Indicator reports presented on the website were also created using Prevention Quality Indicator (PQI) software developed by the Agency for Health Care Research and Quality (AHRQ). PQIs are a set of measures that can be used to identify

"ambulatory care sensitive conditions," which are conditions for which good outpatient care can potentially prevent the need for hospitalization, complications or more severe disease.

Through the hospital claims data and by working with KHA, hospital charge information by DRG, severity level, and length of stay is available on the website.

Vernita Julian stated that there are similar websites available from a CMS point of view using Medicaid data related to nursing homes and home health agencies with only select measures mandated by CMS. She stated a link to that data from the Cabinet site would be beneficial.

Carrie provided examples of the websites of other states such as Florida, Tennessee, and Kansas. She pointed out that ten other states, including Florida, include pharmacy cost data that is updated monthly.

Chandra Venettozzi provided examples of Patient Safety Indicators (PSI) from Florida, Kansas, and Tennessee. PSI results are more difficult to format meaningfully.

#### **FUTURE TRANSPARENCY INITIATIVES**

Carrie suggested convening the committee in January and then meeting on a quarterly basis.

#### **ADJOURN**